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P10/SB/06 (08-03)
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To a collection of information unless it displays a valid OMB control number. Substitute for Form PTO-875 CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY OTHER THAN FOR OR NUMBER FILED BASIC FEE (37 CFR 1.16(a)) SMALL ENTITY NUMBER EXTRA RATE FEF TOTAL CLAIMS RATE FEE (37 CFR 1.16(c)) INDEPENDENT CLAMS minus 20 = OR (37 CFR 1.16(b)) minus 3 z OR MULTIPLE DEPENDENT CLAIM PRESENT X 1 OR (37 CFR 1.15(d)) 'If the difference in column 1 is less than zero, enter '0' in column 2. OR TOTAL CLAIMS AS AMENDED - PART II OR TOTAL 1-23-05 (Column 1) (Column 2) (Column 3) CLAIMS SMALL ENTITY OR OTHER THAN HIGHEST REMAINING NUMBER PRESENT SMALL ENTITY AFTER PREVIOUSLY PAID FOR RATE AMENDMENT EXTRA ADDI. ENOM RATE TIONAL ADDI-(37 CFR 1.16(c)) 2/ Minus TIONAL FEE Independent (37 CFR 1.16(b)) FEE x:25. Minus x : 50 = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) x \$/00 = OR x : 200= + \$280= OR +1360= TOTAL ADD'L FEE TOTAL (Cotumn 1) OR ADD'L FEE (Column 2) (Column 3) CLAIMS HIGHEST REMAINING ENDMENT NUMBER প্রাথাপ্র AFTER PRESENT RATE PREVIOUSLY AMENDMENT **EXTRA** ADDI. PAID FOR Total RATE TIONAL ADDI. Minus TIONAL 3 Independent (3) CFR 1.16(b)) x : Z5 = FEE Minus OR × 1.50 = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d)) x s_*LOO*= OR x : 200= + : 1BD= OR +360. TOTAL TOTAL ADD'L FEE ADD'L FEE (Column 1) OR (Column 2) (Column 3) CLAIMS HIGHEST REMAINING ENDMENT NUMBER AFTER AMENDMENT PRESENT PREVIOUSLY RATE EXTRA ADDI-Total (37 CFR 1.16(c)) PAID FOR RATE TIONAL ADDI. Minus TIONAL FEE FEE Independent (37 CFR 1.16(b)) x <u>: 25</u> = Minus OR x : <u>50 -</u> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d)) x 1/00= OR x 1 200 +1/80= +360 OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "17 the "Highest Number Previously Paid For" In This Space is less than 3, enter "17 the "Highest Number Previously Paid For Total or Independent is the highest number of the Previously Paid For Total or Independent is the highest number of the Previously Paid For Total or Independent is the highest number of the Paid For Total or Independent is the highest number of the Paid For Total or Independent is the highest number of the Paid For Total or Independent is the highest number of the Paid For Total or Independent is the highest number of the Paid For Total or Independent is the highest number of the Paid For Total or Independent is the highest number of the Paid For Total or Independent is the highest number of the Paid For Total or Independent is the highest number of the Paid For Total or Independent is the highest number of the Paid For Total or Independent is the highest number of the Paid For Total or Independent is the highest number of the Paid For Total or Independent is the highest number of the Paid For Total or Independent is the highest number of the Paid For Total or Independent is the paid For T ADD'L FEE TOTAL OR ADD'L FEE

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the complete) process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer U.S. Patent moduling gathering, preparing, and submitting the completed application form to the USPTO. Firms will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.